

**Interim Designation of Agent to Receive Notification
of Claimed Infringement**

Full Legal Name of Service Provider: Brandeis University

Alternative Name(s) of Service Provider (including all names under which the service provider is doing business): _____

Address of Service Provider: 415 South St., Waltham, MA 02454-9110

**Name of Agent Designated to Receive
Notification of Claimed Infringement:** Ann C. Schaffner

Full Address of Designated Agent to which Notification Should be Sent (a P.O. Box or similar designation is not acceptable except where it is the only address that can be used in the geographic location):

Ann C. Schaffner

MS 045

Brandeis University, 415 South St., Waltham MA 02454-9110

Telephone Number of Designated Agent: 781-736-4720

Facsimile Number of Designated Agent: 781-736-4719

Email Address of Designated Agent: copyright@Brandeis.edu

Signature of Officer or Representative of the Designating Service Provider:

_____ **Date:** April 7, 1999

Typed or Printed Name and Title: Irving Epstein

Provost & Senior Vice President for Academic Affairs

**Note: This Interim Designation Must be Accompanied by a \$20 Filing Fee
Made Payable to the Register of Copyrights.**

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